

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

Chapter you are filing under:

- Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

 Check if this an amended filing**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *Joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself**About Debtor 1:****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Richard

First name _____

Middle name _____

Bring your picture identification to your meeting with the trustee.

Sokoloff

Last name and Suffix (Sr., Jr., II, III) _____

About Debtor 2 (Spouse Only in a Joint Case):

First name _____

Middle name _____

Last name and Suffix (Sr., Jr., II, III) _____

2. All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**xxx-xx-1603**

Debtor 1 Richard Sokoloff

Case number (if known) _____

About Debtor 1:**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years** I have not used any business name or EINs.

Include trade names and doing business as names

Business name(s)

EINs

About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs.

Business name(s)

EINs

5. Where you live**4 Tree Top Path
Nesconset, NY 11767**

Number, Street, City, State & ZIP Code

Suffolk

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy**Check one:**

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Richard Sokoloff

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years? No.
 Yes.

| | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? No
 Yes.

| | | |
|----------------|---------------------------|-----------------------------|
| Debtor _____ | Relationship to you _____ | |
| District _____ | When _____ | Case number, if known _____ |
| Debtor _____ | Relationship to you _____ | |
| District _____ | When _____ | Case number, if known _____ |

11. Do you rent your residence? No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you?
 No. Go to line 12.
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 Richard Sokoloff

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Richard Sokoloff Attorney at Law

Name of business, if any

990 South Second Street

Ronkonkoma, NY 11779

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Richard Sokoloff

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

- 15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
- I am not required to receive a briefing about credit counseling because of:
 - Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
 - Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
 - Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only In a Joint Case):

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
- I am not required to receive a briefing about credit counseling because of:
 - Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
 - Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
 - Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Richard Sokoloff

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

| | | | |
|---|---|--|--|
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | |
| | <input checked="" type="checkbox"/> No. Go to line 16b. | | |
| | <input type="checkbox"/> Yes. Go to line 17. | | |
| | 16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | |
| | <input type="checkbox"/> No. Go to line 16c. | | |
| | <input checked="" type="checkbox"/> Yes. Go to line 17. | | |
| | 16c. State the type of debts you owe that are not consumer debts or business debts | | |
| 17. Are you filing under Chapter 7? | <input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18. | | |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | <input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? | | |
| | <input type="checkbox"/> No | | |
| | <input type="checkbox"/> Yes | | |
| 18. How many Creditors do you estimate that you owe? | <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 | <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000 |
| 19. How much do you estimate your assets to be worth? | <input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | <input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |

Part 7: Sign Below

For you

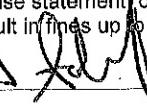
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.


 Richard Sokoloff
 Signature of Debtor 1

Signature of Debtor 2

Executed on

3/13/2018
MM / DD / YYYY

Executed on

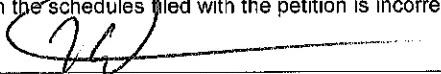
MM / DD / YYYY

Debtor 1 Richard Sokoloff

Case number (if known) _____

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.


Signature of Attorney for Debtor

Date

3/13/2018
MM / DD / YYYY**Marc A. Pergament**

Printed name

Weinberg, Gross & Pergament LLP

Firm name

400 Garden City Plaza**Suite 403****Garden City, NY 11530**

Number, Street, City, State & ZIP Code

Contact phone **(516) 877-2424**

Email address _____

NY

Bar number & State

Certificate Number: 03621-NYE-CC-030690806



03621-NYE-CC-030690806

CERTIFICATE OF COUNSELING

I CERTIFY that on March 9, 2018, at 9:25 o'clock AM EST, Richard Sokoloff received from Credit Card Management Services, Inc. d/b/a Debthelper.com, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of New York, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 9, 2018 By: /s/Wafaa Elmaaroufi

Name: Wafaa Elmaaroufi

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Fill in this information to identify your case:

| | | | |
|--|------------------|-------------|-----------|
| Debtor 1 | Richard Sokoloff | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK | | | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1 Bethpage Federal Credit Union

Creditor's Name

899 S. Oyster Bay Road
Bethpage, NY 11714

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

0961

Describe the property that secures the claim:

2016 BMW X3 Lease

Unknown

\$0.00

Unknown

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) Home Equity Line of Credit

2.2 BMW Financial

Creditor's Name

300 Chestnut Ridge Road
Woodcliff Lake, NJ
07677-7731

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

| | | |
|---|---|---|
| Debtor 1 | Richard Sokoloff | Case number (if known) |
| First Name | Middle Name | Last Name |
| 2.3 | Chase | Describe the property that secures the claim: |
| Creditor's Name | 4 Tree Top Path Nesconset, NY 11767 Suffolk County | |
| P.O. Box 183168 Columbus, OH 43218-3166 | \$365,076.00 \$566,900.00 \$0.00 | |
| Number, Street, City, State & Zip Code | As of the date you file, the claim is: Check all that apply. | |
| <input type="checkbox"/> Contingent | <input type="checkbox"/> Unliquidated | |
| <input type="checkbox"/> Disputed | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | |
| <input type="checkbox"/> Debtor 1 only | <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) | |
| <input type="checkbox"/> Debtor 2 only | <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) | |
| <input type="checkbox"/> Debtor 1 and Debtor 2 only | <input type="checkbox"/> Judgment lien from a lawsuit | |
| <input checked="" type="checkbox"/> At least one of the debtors and another | <input checked="" type="checkbox"/> Other (including a right to offset) First Mortgage | |
| <input type="checkbox"/> Check if this claim relates to a community debt | | |
| Date debt was incurred | Last 4 digits of account number 9974 | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$414,729.47

If this is the last page of your form, add the dollar value totals from all pages.

\$414,729.47

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | | |
|--------------------------|--|--|
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code Chase P.O. Box 24696 Columbus, OH 43224 | On which line in Part 1 did you enter the creditor? 2.3 |
| | | Last 4 digits of account number _____ |

Fill in this information to identify your case:

| | | |
|---|-------------------------------------|-------------|
| Debtor 1 | Richard Sokoloff | |
| | First Name | Middle Name |
| Debtor 2 (Spouse if, filing) | Last Name | |
| | First Name | Middle Name |
| | Last Name | |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF NEW YORK | |
| Case number (if known) | | |

Check if this is an amended filing

Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

| | Total claim | Priority amount | Nonpriority amount |
|--|--|--------------------|--------------------|
| 2.1 Internal Revenue Service Priority Creditor's Name Special Procedures 2 MetroTech Center 100 Myrtle Avenue Brooklyn, NY 11201 Number Street City State Zip Code | Last 4 digits of account number \$80,000.00 | \$80,000.00 | \$0.00 |
| Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify 2016, 2017 Income Taxes | | |

Debtor 1 Richard Sokoloff

Case number (if known)

| | | | | | |
|-----|---|--|-------------|-------------|--------|
| 2.2 | <u>NYS Dept. of Tax</u> Priority Creditor's Name Bankruptcy Unit, Special Procedures P.O. Box 5300 Albany, NY 12205-0300 Number Street City State Zip Code | Last 4 digits of account number | \$25,000.00 | \$25,000.00 | \$0.00 |
| | When was the debt incurred? | | | | |
| | As of the date you file, the claim is: Check all that apply | | | | |
| | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | | | | |
| | Type of PRIORITY unsecured claim: | | | | |
| | <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify <u>2016 and 2017 Income Taxes</u> | | | | |
| | Who incurred the debt? Check one. | | | | |
| | <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| | Is the claim subject to offset? | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

| | | | Total claim |
|-----|--|--|-------------|
| 4.1 | <u>Andrea Sokoloff</u> Nonpriority Creditor's Name 4 Tree Top Path Nesconset, NY 11767 Number Street City State Zip Code | Last 4 digits of account number | \$12,000.00 |
| | Who Incurred the debt? Check one. | | |
| | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | |
| | Is the claim subject to offset? | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| | As of the date you file, the claim is: Check all that apply | | |
| | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | |
| | Type of NONPRIORITY unsecured claim: | | |
| | <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Loan</u> | | |

Debtor 1 **Richard Sokoloff**

Case number (if known)

| | | | |
|-----|--|--|--|
| 4.2 | Capital One NA Nonpriority Creditor's Name P.O. Box 71087 Charlotte, NC 28272 Number Street City State Zip Code | Last 4 digits of account number | \$1,622.00 |
| | Who incurred the debt? Check one. | When was the debt incurred? | |
| | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | As of the date you file, the claim is: Check all that apply | |
| | <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Type of NONPRIORITY unsecured claim: |
| | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts | <input type="checkbox"/> Other. Specify _____ |
| 4.3 | Coleen Bonti Nonpriority Creditor's Name c/o Craig B. Sanders, Esq. 100 Garden City Plaza, Suite 500 Garden City, NY 11530 Number Street City State Zip Code | Last 4 digits of account number | 5478 Unknown |
| | Who incurred the debt? Check one. | When was the debt incurred? | |
| | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | As of the date you file, the claim is: Check all that apply | |
| | <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? | <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | Type of NONPRIORITY unsecured claim: |
| | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts | <input type="checkbox"/> Other. Specify Fair Debt Claim _____ |
| 4.4 | Glenn Garbus Nonpriority Creditor's Name c/o Jones, Wolf & Kapasi, LLC One Grand Central Place 60 East 42nd Street, 46th Floor New York, NY 10017 Number Street City State Zip Code | Last 4 digits of account number | 0585 Unknown |
| | Who incurred the debt? Check one. | When was the debt incurred? | |
| | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | As of the date you file, the claim is: Check all that apply | |
| | <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? | <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | Type of NONPRIORITY unsecured claim: |
| | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts | <input type="checkbox"/> Other. Specify Fair Debt Claim _____ |

Debtor 1 **Richard Sokoloff**

Case number (if known)

| | | | |
|-----|--|--|-----------------|
| 4.5 | PSEG Nonpriority Creditor's Name 15 Park Drive Melville, NY 11747 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number _____ When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Services _____ | \$236.00 |
| 4.6 | Robert Wilson CPA Nonpriority Creditor's Name 23 Grand Avenue Farmingdale, NY 11735 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number _____ When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Accounting Services _____ | \$825.00 |
| 4.7 | Rochelle Denoon Nonpriority Creditor's Name c/o Ahmad Keshavarz, Esq. The Law Office of Ahmad Keshavarz 16 Court Street, 26th Floor Brooklyn, NY 11241-1026 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number 7178 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Fair Debt Claim _____ | Unknown |

| | | | |
|----------|---|---|----------------|
| Debtor 1 | Richard Sokoloff | Case number (if known) | |
| 4.8 | <p>Sarah Heerbrandt Nonpriority Creditor's Name c/o Mitchell L. Pashkin, Esq. 775 Park Avenue, Suite 255 Huntington, NY 11743</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number</p> <p>6581</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Fair Debt Claim</p> | Unknown |
| 4.9 | <p>Talia Zeitz Nonpriority Creditor's Name c/o M. Harvey Rephen & Associates, PC 708 Third Avenue, 6th Floor New York, NY 10017</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number</p> <p>_____</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Potential Fair Debt Claim</p> | Unknown |
| 4.10 | <p>Teresa M. Shedler Nonpriority Creditor's Name c/o Lawrence C. Hersh, Esq. 17 Sylvan Street, Suite 102B Rutherford, NJ 07070</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number</p> <p>0728</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Fair Debt Claim</p> | Unknown |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.2 of (Check one):

Debtor 1 Richard Sokoloff

Case number (if known)

Office of Attorney General
120 Broadway
New York, NY 10271

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
United States Attorney
271 Cadman Plaza
Attn: Chief of Civil Division
Brooklyn, NY 11201

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.1 of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
United States Attorney's Office
Eastern District of New York
610 Federal Plaza, 5th Floor
Attn: Long Island Bankruptcy
Processing
Central Islip, NY 11722-4454

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.1 of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
US Dept. of Justice
Tax Division
Box 55
Ben Franklin Station
Washington, DC 20044

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.1 of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | Total Claim |
|--------------------------|---|----------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | \$ <u>0.00</u> |
| | 6b. Taxes and certain other debts you owe the government | \$ <u>105,000.00</u> |
| | 6c. Claims for death or personal injury while you were Intoxicated | \$ <u>0.00</u> |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | \$ <u>0.00</u> |
| | 6e. Total Priority. Add lines 6a through 6d. | \$ <u>105,000.00</u> |
| Total claims from Part 2 | 6f. Student loans | \$ <u>0.00</u> |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | \$ <u>0.00</u> |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | \$ <u>0.00</u> |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | \$ <u>14,683.00</u> |
| | 6j. Total Nonpriority. Add lines 6f through 6i. | \$ <u>14,683.00</u> |

United States Bankruptcy Court
Eastern District of New York

In re Richard Sokoloff

Debtor(s)

Case No.
Chapter

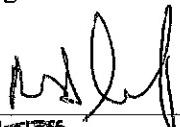
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VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: 3/13/2018

Date: 3/13/2018


Richard Sokoloff
Signature of Debtor

Signature of Attorney
Marc A. Pergament
Weinberg, Gross & Pergament LLP
400 Garden City Plaza
Suite 403
Garden City, NY 11530
(516) 877-2424 Fax: (516) 877-2460

Andrea Sokoloff
4 Tree Top Path
Nesconset, NY 11767

Bethpage Federal Credit Union
899 S. Oyster Bay Road
Bethpage, NY 11714

BMW Financial
300 Chestnut Ridge Road
Woodcliff Lake, NJ 07677-7731

Capital One NA
P.O. Box 71087
Charlotte, NC 28272

Chase
P.O. Box 183168
Columbus, OH 43218-3166

Chase
P.O. Box 24696
Columbus, OH 43224

Coleen Bonti
c/o Craig B. Sanders, Esq.
100 Garden City Plaza, Suite 500
Garden City, NY 11530

Glenn Garbus
c/o Jones, Wolf & Kapasi, LLC
One Grand Central Place
60 East 42nd Street, 46th Floor
New York, NY 10017

Internal Revenue Service
Special Procedures
2 MetroTech Center
100 Myrtle Avenue
Brooklyn, NY 11201

NYS Dept. of Tax
Bankruptcy Unit, Special Procedures
P.O. Box 5300
Albany, NY 12205-0300

Pitney Bowes
220 Miller Place
Hicksville, NY 11801

PSEG
15 Park Drive
Melville, NY 11747

Robert Wilson CPA
23 Grand Avenue
Farmingdale, NY 11735

Rochelle Denoon
c/o Ahmad Keshavarz, Esq.
The Law Office of Ahmad Keshavarz
16 Court Street, 26th Floor
Brooklyn, NY 11241-1026

Sarah Heerbrandt
c/o Mitchell L. Pashkin, Esq.
775 Park Avenue, Suite 255
Huntington, NY 11743

State of New York
Office of Attorney General
120 Broadway
New York, NY 10271

Talia Zeitz
c/o M. Harvey Rephen & Associates, PC
708 Third Avenue, 6th Floor
New York, NY 10017

Teresa M. Shedler
c/o Lawrence C. Hersh, Esq.
17 Sylvan Street, Suite 102B
Rutherford, NJ 07070

United States Attorney
271 Cadman Plaza
Attn: Chief of Civil Division
Brooklyn, NY 11201

United States Attorney's Office
Eastern District of New York
610 Federal Plaza, 5th Floor
Attn: Long Island Bankruptcy Processing
Central Islip, NY 11722-4454

US Dept. of Justice
Tax Division
Box 55
Ben Franklin Station
Washington, DC 20044

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL
BANKRUPTCY RULE 1073-2(b)

DEBTOR(S): Richard Sokoloff CASE NO.: _____

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (*or any other petitioner*) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:

[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]

- NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.
 THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:

1. CASE NO.: _____ JUDGE: _____ DISTRICT/DIVISION: _____

CASE STILL PENDING (Y/N): _____ [If closed] Date of closing: _____

CURRENT STATUS OF RELATED CASE: _____
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): _____

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: _____

2. CASE NO.: _____ JUDGE: _____ DISTRICT/DIVISION: _____

CASE STILL PENDING (Y/N): _____ [If closed] Date of closing: _____

CURRENT STATUS OF RELATED CASE: _____
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): _____

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: _____

3. CASE NO.: _____ JUDGE: _____ DISTRICT/DIVISION: _____

CASE STILL PENDING (Y/N): _____ [If closed] Date of closing: _____

(OVER)

DISCLOSURE OF RELATED CASES (cont'd)

CURRENT STATUS OF RELATED CASE: _____
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): _____

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: _____

NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file.

TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE:

I am admitted to practice in the Eastern District of New York (Y/N): Y

CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/petitioner's attorney, as applicable):

I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form.

Marc A. Pergament

Signature of Debtor's Attorney
Weinberg, Gross & Pergament LLP
400 Garden City Plaza
Suite 403
Garden City, NY 11530
(516) 877-2424 Fax:(516) 877-2460

Signature of Pro Se Debtor/Petitioner

Signature of Pro Se Joint Debtor/Petitioner

Mailing Address of Debtor/Petitioner

City, State, Zip Code

Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.